



**CORPORATION OF HAMILTON
NOMINATION FORM**

COMMON COUNCILLOR

Name in full: _____

as a Common Councillor of the City of Hamilton

Proposed by: _____

(Name of Proposer in full)

(Signature of Proposer)

Seconded by: _____

(Name of Seconder in full)

(Signature of Seconder)

(Signature of Candidate)

Date: _____

Please return completed nomination form to the Returning Officer at the Corporation of Hamilton office located at City Hall, 12 Church Street, Hamilton.